

Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

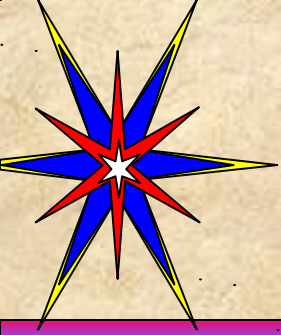
Click on the next button to continue.

Smart Testing is defined as conducting Biochemical testing in such a manner that it is unpredictable to the testing

TRUE

FALSE

NEXT



Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

Click on the next button to continue.

Who is responsible for inspecting the latrine prior to the collection?

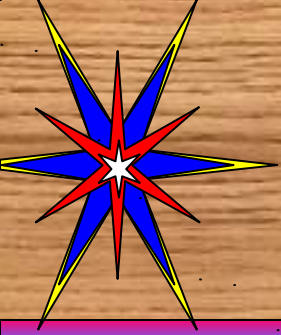
UPL

Observer

Commander

Donor

NEXT



Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

Click on the next button to continue.

Who is responsible for re-capping the specimen bottle after the specimen is provided?

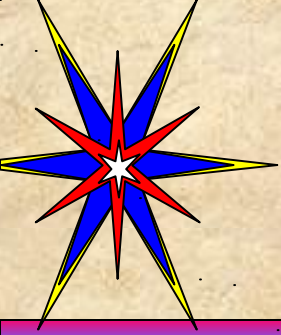
UPL

Observer

Commander

Donor

NEXT



Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

Click on the next button to continue.

The first person to sign the chain of custody on the back of the DD Form 2624 is?

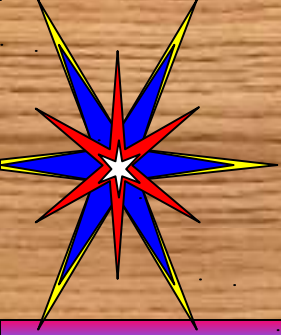
UPL

Observer

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Donor

NEXT



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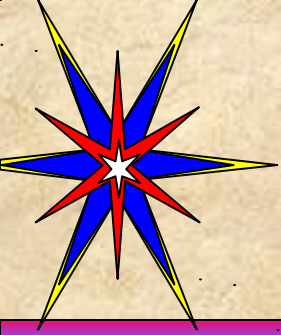
Which of these are requirements to be an observer?

Currently enrolled within the ASAP NCO or Officer (CPL or above)

NCO or Officer (E-5 or above)

Selected by the ADCO

NEXT



Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

Click on the next button to continue.

Who signs the unit ledger?

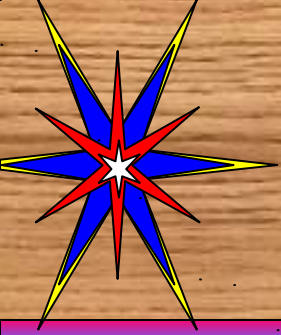
The Observer and the UPL

The Observer and the Donor

The Donor and the UPL

The Donor Only

NEXT



Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

Click on the next button to continue.

How much urine is required per specimen collected?

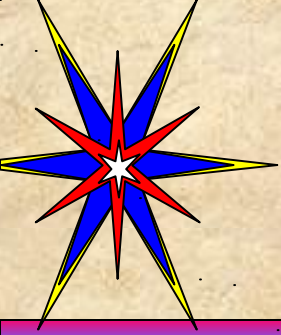
45 mL

60 mL

25 mL

30 mL

NEXT



Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

Click on the next button to continue.

Who initials the bottle label?

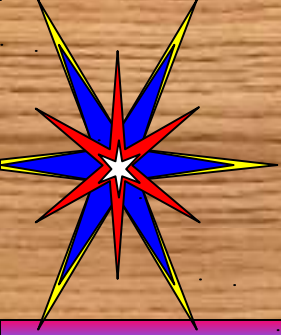
The Observer and the UPL

The Observer and the Donor

The Donor and the UPL

The donor only

NEXT



Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

Click on the next button to continue.

The safe or filing cabinet must weigh ___ pounds or be securely attached to the building

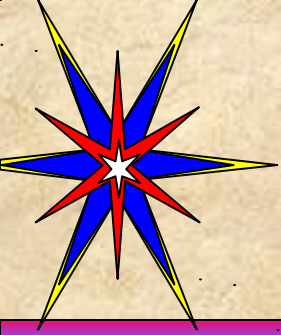
300

500

250

750

NEXT



Check Point

Instructions: Read the question then click the mouse on your answer. You will receive immediate feedback on your answer.

Click on the next button to continue.

Who is responsible for selecting observers?

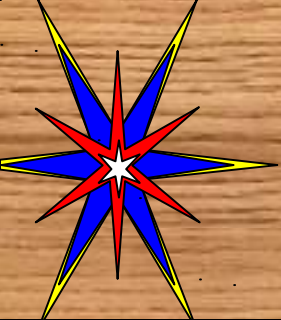
The UPL

The ADCO

The 1SG

The Commander

NEXT



Check Point

SPECIMEN CUSTODY DOCUMENT - DRUG TESTING

1. SUBMITTING UNIT
ALCOHOL AND DRUG CONTROL OFFICE
BLDG. 2456
FORT GEORGE G. MEADE, MD 2075-5077

2. ADDITIONAL SERVICE INFORMATION (Second Echelon)
A. CO No Such BN
FT. NO PLACE MD.
22222-2222

3. BASE/AREA CODE
TEST

4. UNIT IDENTIFICATION CODE
WAB123

5. DOCUMENT/ BATCH NUMBER
0001

6. DATE SPECIMEN COLLECTED (YYYY MM DD)
2005 04 19

7. SPECIMEN NUMBER	8. COMPLETE SSN	9. TEST BASIS	10. TEST INFORMATION	11. PRESCREEN	
				THC	COC
(1)	008 08 0008	UI	A		
(2)	001 01 0001	UI	A		
(3)	444 44 0004	UI	A		
(4)	666 66 6666	UI	A		
(5)	888 77 7777	UI	A		
(6)	333 22 1111	UI	B		
(7)	000 11 2222	UI	A		
(8)	999 88 7777	UI	A		
(9)	987 65 4321	UI	B		
(10)	123 45 6789	UI	B		
(11)	222 33 4444	UI	B		
(12)	111 22 3333	UI	B		

12. CERTIFICATION. I certify that I am a laboratory certifying official, that the laboratory results indicated on this form were correctly determined by proper laboratory procedures, and that they are correctly annotated.

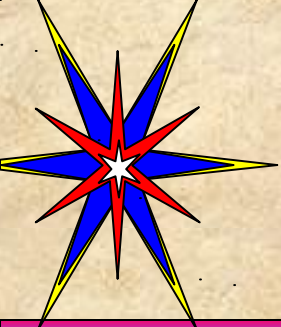
(1) SIGNATURE (2) DATE SIGNED

A. LABORATORY CONDUCTING DRUG TESTING

What is wrong with this 2624?

Click here to check your answer

NEXT



Check Point

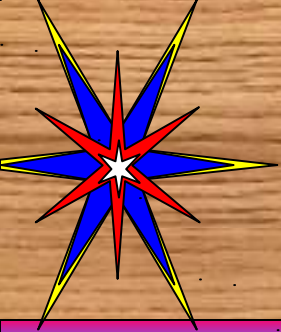
UNIT URINALYSIS LEDGER

1. SUBMITTING UNIT 11TH SUPPORT BN 2400 COOPER ST FT MEADE MD 20755		2. UPL: SGT JOHN SMITH		INITIALS: JS	4. UNIT IDENTIFICATION CODE: W23456	5. DATE SPECIMEN COLLECTED: mm dd yy 2003 06 10
3. PHONE: (301) 677-8542						
6. DOCUMENT/ BATCH NUMBER	7. SPECIMEN NUMBER	8. COMPLETE SOCIAL SECURITY NUMBER	9. TEST BASIS	10. RANK	11. SOLDIER'S SIGNATURE SOLDIER'S PRINTED NAME	12. ACTION TAKEN / REMARKS
0001	001	123-45-6789	1R	SGT	BENJAMIN MOORE BENJAMIN MOORE	13. OBSERVER'S SIGNATURE OBSERVER'S PRINTED NAME CORY LANE CORY LANE
0001	002	476-21-8976	1R	CPT	JOHN ACRES JOHN ACRES	
0002	001	543-21-6789	RO	PVT	MARTY WINN MARTY WINN	
0001	003	111-22-3333	1R	SSG	TONY WELLMAN TONY WELLMAN	
0001	004	761-76-1113	1R	SSG	HOWARD JOHNSON HOWARD JOHNSON	MARK LOWE MARK LOWE

What is wrong with this Unit Ledger?

Click here to check your answer

NEXT



Check Point

Which of the corrections to the test information on the DD Form 2624 is done properly?

Specimen #1

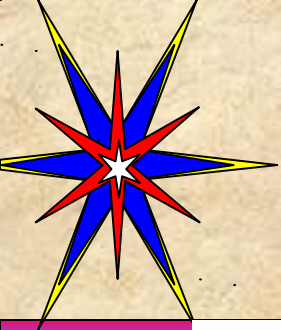
Specimen #2

Specimen #3

Specimen #4

NEXT

SPECIMEN CUSTODY DOCUMENT - DRUG TESTING					A. LABORATORY CONDUCTING TESTING	
1. SUBMITTING UNIT Fort Swampy ASAP Bldg 1234 Gator Ave Fort Swampy LA 12345		2. ADDITIONAL SERVICE INFORMATION (SECOND ECHELON) 1/16th INF 1650 swamp rat place, FT. Swampy, LA 12345 (555)-555-1234				
3. BASE/AREA CODE FC65	4. UNIT IDENTIFICATION CODE W 2LAAA	5. DOCUMENT/BATCH NUMBER 0002	6. DATE SPECIMEN COLLECTED YYYY.MM.DD 20050706			
Version 530L						
7. SPECIMEN NUMBER	8. COMPLETE SSN	9. TEST BASIS	10. TEST INFO	11. PRESCREEN	E. DISC CODE	
001	000-11-3004	IR	A B MS 6 July 05			
002	000-22-3022	IR	B A MS 6 July 05			
003	000-44-3007	IR	B A MS			
004	000-22-4010	IR	B A MS 6 July 05			
005	000-33-4006	IR	A			
006	000-11-1006	IR	A			
007	000-22-2006	IR	A			
008	000-44-1004	IR	B			
009	000-22-1006	IR	B			
010	999-22-3004	IR	A			
011	000-22-3004	IR	A			
012	000-33-3020	IR	A			
H. CERTIFICATION. I certify that I am a laboratory official, that the laboratory results indicated on this form were correctly determined by proper laboratory procedures, and they are correctly annotated.					(3) CERTIFYING OFFICIAL (Printed Name and Title)	
(1) SIGNATURE		(2) DATE SIGNED				



Check Point

SPECIMEN CUSTODY DOCUMENT - DRUG TESTING						A. LABORATORY CONDUCTING TESTING	
1. SUBMITTING UNIT Fort Swampy ASAP Bldg 1234 Gator Ave Fort Swampy LA 12345		2. ADDITIONAL SERVICE INFORMATION (SECOND ECHELON) 1/16th INF 1650 swamp rat place, FT. Swampy, LA 12345 (555)-555-1234					
3. BASE/AREA CODE FC65	4. UNIT IDENTIFICATION CODE W 2LAAA	5. DOCUMENT/BATCH NUMBER 0001	6. DATE SPECIMEN COLLECTED YYYY.MM.DD 20050706		B. BATCH NUMBER	C. REPORT OF RESULTS	
Version 530L						D. DRUGS TESTED	
7. SPECIMEN NUMBER	8. COMPLETE SSN	9. TEST BASIS	10. TEST INFO	11. PRESCREEN	E. DISC CODE	F. ACCESSION NUMBER	G. RESULT
001	000-44-2004	IR	A				
002	000-44-2004	IR	A		VOID		
003	000-11-3005	IR	A		VOID ¹¹⁸ 6-3-05		
004	000-44-3008	IR	A		VOID ¹¹⁸ 6-3-05		
005	000-11-2006	IR	B		VOID		
006	000-22-1						
007	000-33-3						
008	999-11-3						
009	000-33-3						
010	000-11-400						
011	000-33-3007	IR	A				
012	000-22-400						
H. CERTIFICATION. I certify that I am properly trained and have followed proper laboratory procedures, and that the results are reliable.							
(1) SIGNATURE							

Which of the voided specimens on the DD Form 2624 is annotated correctly?

Specimen #2

Specimen #3

Specimen #4

Specimen #5

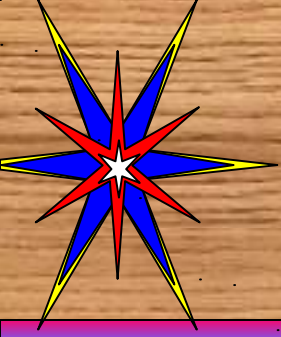
NEXT



Pre-Collection Procedures

- **Commander selects observers - this is a commanders responsibility but may be delegated to the UPL or 1SG.**

NOTE: Observers may be selected prior to the test date, but should not be notified of this duty until the selected Soldiers are notified. The less personnel that are aware of the test date the better your smart testing will be.



Check Point

That is
CORRECT, Great
Job!!!





Check Point

**Sorry, but you are
incorrect.**



Smart Testing

- ▮ **Definition of Smart Testing:** The process where biochemical testing is conducted in such a manner that it is not predictable to the testing population.
- ▮ If your unit is conducting smart testing then every soldier should believe that he/she can and may be tested on any given day at any given time.



Pre-Collection Procedures

- ▣ **UPL inspects the latrine(s):**
 - ▣ **UPL checks the latrine(s) before the collection starts.**
 - ▣ **Ensure all cleaning agents (cleansing powder, bleach, etc) are removed from the area.**
 - ▣ **Ensure paper towels and hand soap are available at the wash basin to allows Soldiers to wash their hands after providing their specimen.**
 - ▣ **Place “OFF LIMITS” sign on latrine for non-testing personnel.**



- **The observer should instruct the donor to make sure the specimen bottle cap is secure.**

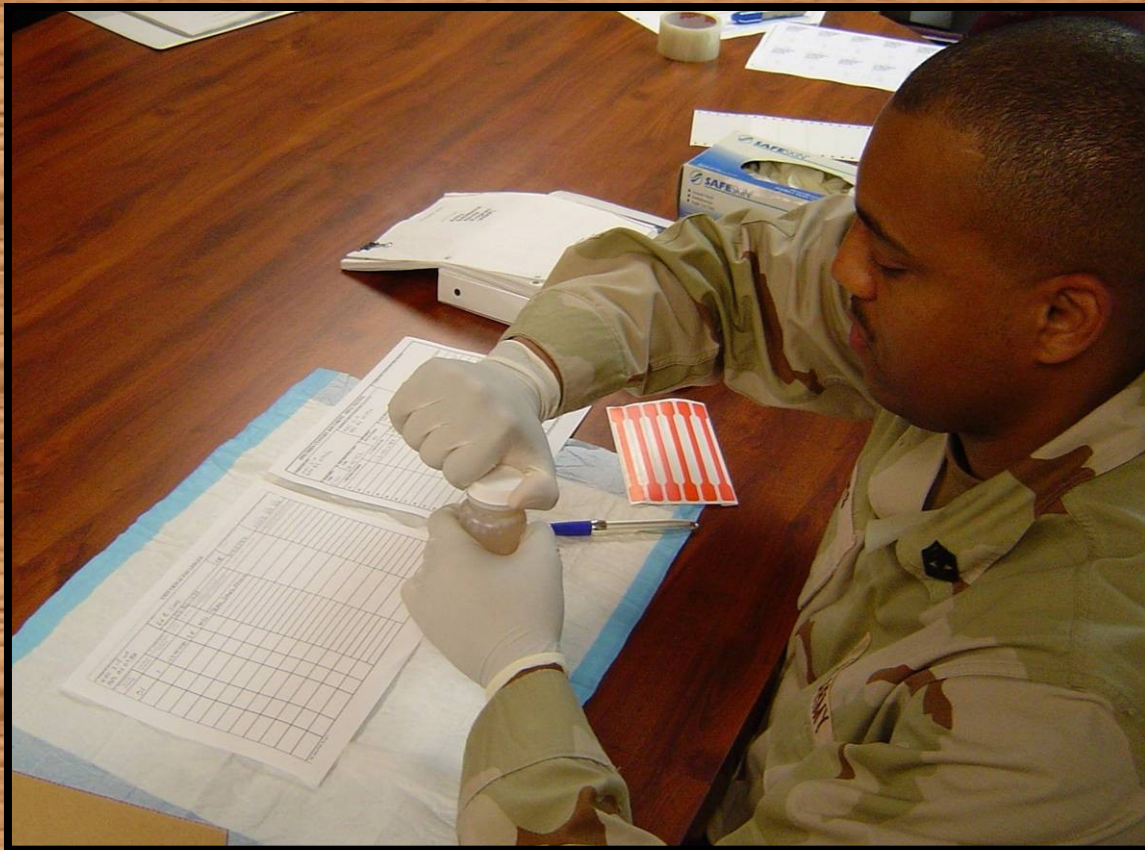
□ The donor will then recap the specimen, ensuring that the cap is secure.



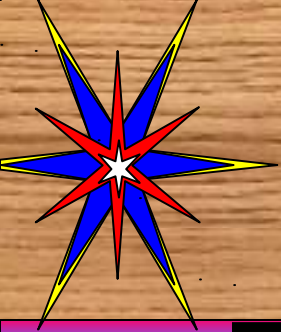
- **The observer should instruct the donor to make sure the specimen bottle cap is secure.**

▮ The donor will dump the excess specimen from the wide mouth collection cup into the commode.

▮ Then the donor will recap the specimen bottle.



- The UPL will inspect the specimen for possible adulteration, ensure the cap is secure, and ensure there is at least 30 mL of urine.

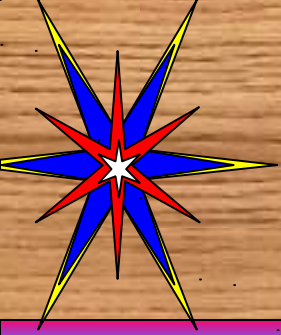


DD Form 2624 (Back)

12. CHAIN OF CUSTODY		IAN	THRU
DATE (YYMMDD)	RELEASED BY	RECEIVED BY	PURPOSE OF CHANGE/ REMARKS
a	h	c	d
(1) 050426	SIGNATURE Michael C. Biggerstaff	SIGNATURE Jeff Washburn	Specimens released by UPL to IBTC
	NAME Michael C. Biggerstaff	NAME Jeff Washburn	
(2) 050426	SIGNATURE Jeff Washburn	SIGNATURE	Specimens shipped to FTDTL by USPS
	NAME Jeff Washburn	NAME USPS	
(3)	SIGNATURE	SIGNATURE	

This is a blown up portion of the back of the DD Form 2624.

- The UPL released the specimens to the IBTC.
- The IBTC then released the specimens to the United States Postal Service (USPS). Note: FTDTL = Forensic Toxicology Drug Testing Laboratory
- The mail carrier is not required to sign the chain of custody, because the box is sealed with the DD Form 2624 inside when taken to the post office.



Quality Control Inspection

- NOTE: Only UPLs who DO NOT have access to an IBTC for a quality control check will normally use Certificates of Correction.
- Also, these UPLs will not sign the specimens over to another person, but will sign the specimens over to the mail carrier, such as USPS, FedEx, UPS, or DHL.
- In the below Example SGT Myer is deployed; he signs the specimens over to the postal service (Mail clerk).

12. CHAIN OF CUSTODY		LAN	THRU
DATE (YYMMDD) a.	RELEASED BY b.	RECEIVED BY c.	PURPOSE OF CHANGE/ REMARKS d.
(1) 050426	SIGNATURE Joshua B. Myer	SIGNATURE	Specimens mailed to FTDITL by USPS
	NAME Joshua B. Myer	NAME USPS	
	SIGNATURE	SIGNATURE	
	NAME	NAME	



Pre-Collection: Observers

- ▣ Criteria for Observers:**
 - ▣ NCO or Officer (E-5 or above).**
 - ▣ Same gender as the personnel being observed.**
 - ▣ Possesses sufficient maturity and integrity to preserve the dignity of the Soldier being observed.**
 - ▣ Not currently enrolled within the ASAP Rehabilitation Program or currently under investigation for any substance abuse related offense.**



▮ The observer's signature verifies that he complied with the collection process, directly observed the Soldier provide the specimen, and maintained eye contact with the specimen until it was sealed with tamper evident

▮ The observer will sign the unit ledger.

▮ Note: Any unusual occurrences should be annotated in the Remarks block of the unit ledger.

UNIT URINALYSIS LEDGER

[illegible]



▮ The donor then signs the unit ledger

▮ The donor's signature verifies that she provided the urine in the specimen bottle, observed the specimens being sealed with tamper evident tape, and observed the specimen being placed in the

UNIT URINALYSIS LEDGER

[illegible]



- **The Donor then initials the bottle label**
- **Make sure the donor initials the label with 2 or 3 letters, such as “MB” or “MCB”.**
- **Do Not let the donor sign the label.**

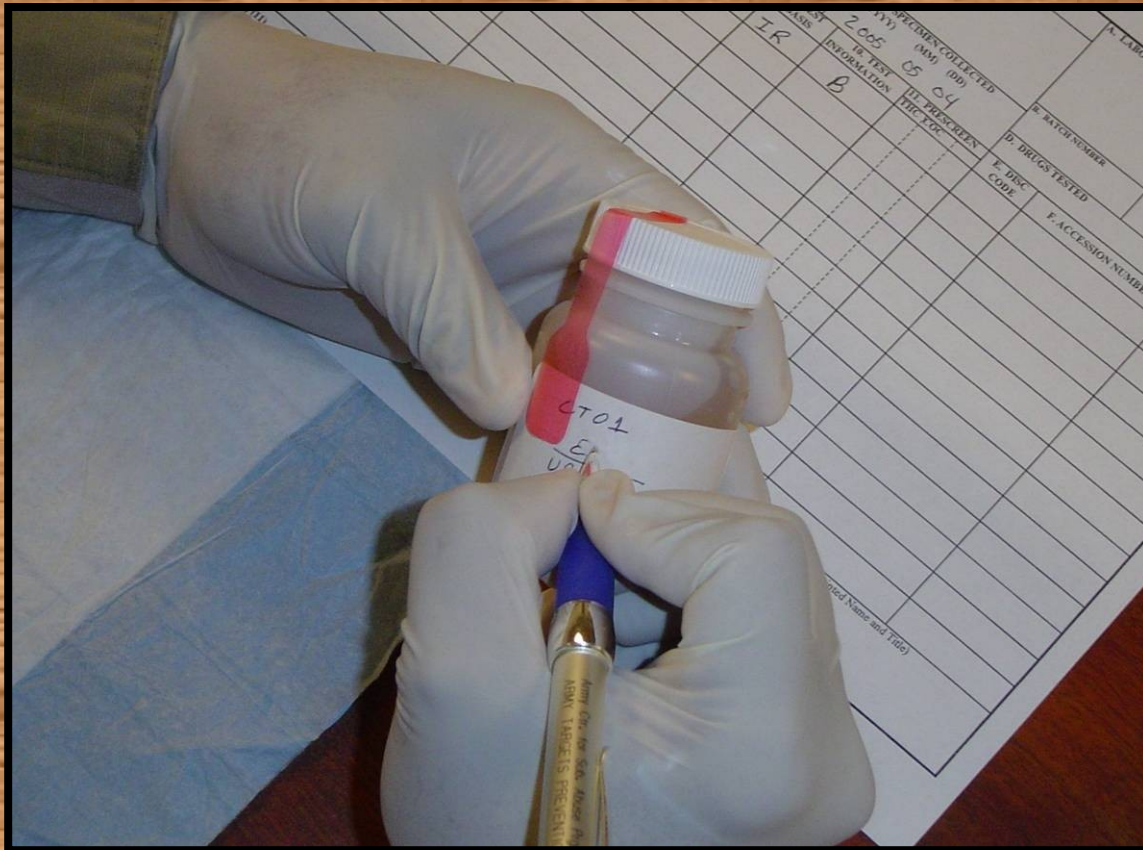
20050426

FC 99

UPL Init

**MB
Donor Init**

256-36-7938



▮ The UPL will then initial the bottle label.

▮ The initials signify that the UPL received the specimen from the donor, checked for possible adulteration, ensured the cap was secure, and placed tamper evident tape



Post collection procedures: Temporary Storage

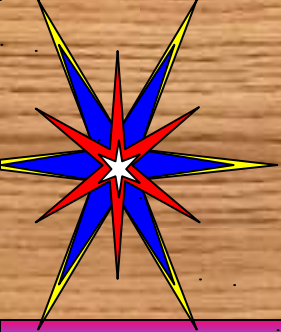
- ▢ A safe, secure filing cabinet or metal wall locker will be used to store specimens.
- ▢ The storage container must be in a lockable room.
- ▢ The Safe, filing cabinet or wall locker:
 - ▢ **must weigh at least 500 pounds.**
 - ▢ or be attached to the structure of the building by a chain or bolted to the wall/floor.



Pre-Collection Procedures

- **Commander selects observers - this is a commanders responsibility but may be delegated to the UPL or 1SG.**

NOTE: Observers may be selected prior to the test date, but should not be notified of this duty until the selected Soldiers are notified. The less personnel that are aware of the test date the better your smart testing will be.



What's wrong?

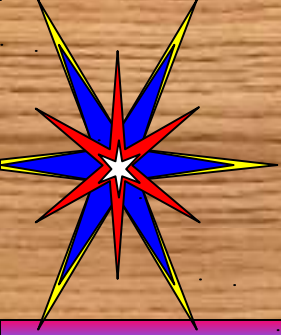
SPECIMEN CUSTODY DOCUMENT - DRUG TESTING										A. LABORATORY CONDUCTING DRUG TESTING	
1. SUBMITTING UNIT ALCOHOL AND DRUG CONTROL OFFICE BLDG. 2456 FORT GEORGE G. MEADE, MD 2075-5077					2. ADDITIONAL SERVICE INFORMATION (Second Echelon) A. CO No Such BN FT. NO PLACE MD. 22222-2222						
3. BASE/AREA CODE		4. UNIT IDENTIFICATION CODE		5. DOCUMENT/BATCH NUMBER		6. DATE SPECIMEN COLLECTED (YYYY)		B. BATCH NUMBER		C. REPORT OF RESULT (DTG/Serial No.)	
TEST		WAB123		0001		20050419					
7. SPECIMEN NUMBER		8. COMPLETE SSN		9. TEST BASIS		10. TEST INFORMATION		11. PRESCREEN			
(1)		008'08'0008		UI		A					
(2)		001'01'0001		UI		A					
(3)		444'44'0004		UI		A					
		666'66'6666		UI		A					
		888'77'7777		UI		A					
		333'22'1111		UI		B					
		000'11'2222		UI		A					
		999'88'7777		UI		A					
		987'65'4321		UI		B					
		123'45'6789		UI		B					
		222'33'4444		UI		B					
(12)		111'22'3333		UI		B					
H. CERTIFICATION. I certify that I am a laboratory certifying official, that the laboratory results indicated on this form were correctly determined by proper laboratory procedures, and that they are correctly annotated.										(3) CERTIFYING OFFICIAL (Printed Name and Title)	
(1) SIGNATURE					(2) DATE SIGNED						

The test basis should be IU not UI; this must be corrected using a certificate of correction

Overwrite; should be corrected with a Certificate of correction



**The Observer
must print and
sign for each
specimen
observed.**



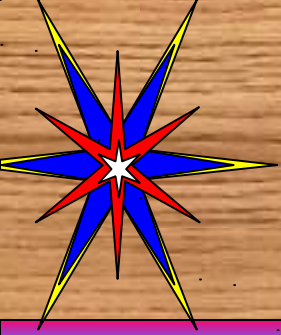
Correction

SPECIMEN CUSTODY DOCUMENT - DRUG TESTING						A. LABORATORY CONDUCTING TESTING		
1. SUBMITTING UNIT Fort Swampy ASAP Bldg 1234 Gator Ave Fort Swampy LA 12345		2. ADDITIONAL SERVICE INFORMATION (SECOND ECHELON) 1/16th INF 1650 swamp rat place, FT. Swampy, LA 12345 (555)-555-1234						
3. BASE/AREA CODE FC65	4. UNIT IDENTIFICATION CODE W 2LAAA	5. DOCUMENT/BATCH NUMBER 0002	6. DATE SPECIMEN COLLECTED	7. SPECIMEN NUMBER	8. COMPLETE SSN	9. TEST BASIS	10. TEST INFO	11. PRESCREEN E
001					000-11-3004	IR	B ^{MS} A 6 July 05	
002					000-22-3022	IR	A ^{MS} B 6 July 05	
003					000-44-3007	IR	B ^{MS} A	
004					000-22-4010	IR	B ^{MS} A 6 July 05	
005					000-33-4006	IR	A	
006					000-11-1006	IR	A	
007					000-22-2006	IR	A	
008					000-44-1004	IR	B	
009					000-22-1006	IR	B	
010					999-22-3004	IR	A	
011					000-22-3004	IR	A	
012					000-33-3020	IR	A	
H. CERTIFICATION. I certify that I am a laboratory official, that the laboratory results indicated on this form were proper laboratory procedures, and they are correctly annotated.								
(1) SIGNATURE						(2) DATE SIGNATURE		

DD Form 2624, FEB 1993 Replaces OPNAV 5350/2 (FEB 82), DA Form 5180 (AUG 86), and AF

- The incorrect information is lined through, the correct information entered, initialed and dated.

- In addition, any corrections to the SSN, Test Basis, or Test information will invalidate the barcode; therefore the first ½ of the barcode must be blackened out.



Void

SPECIMEN CUSTODY DOCUMENT - DRUG TESTING						A. LABORATORY CONDUCTING TESTING	
1. SUBMITTING UNIT Fort Swampy ASAP Bldg 1234 Gator Ave Fort Swampy LA 12345		2. ADDITIONAL SERVICE INFORMATION (SECOND ECHELON) 1/16th INF 1650 swamp rat place, FT. Swampy, LA 12345 (555)-555-1234					
3. BASE/AREA CODE FC65	4. UNIT IDENTIFICATION CODE W 2LAAA	5. DOCUMENT/BATCH NUMBER 0001	6. DATE SPECIMEN COLLECTED YYYYMMDD 20050706		B. BATCH NUMBER	C. REPORT OF RESULTS	
Version 530L						D. DRUGS TESTED	
7. SPECIMEN NUMBER	8. COMPLETE SSN	9. TEST BASIS	10. TEST INFO	11. PRESCREEN	E. DISC CODE	F. ACCESSION NUMBER	G. RESULT
001	000-44-2004	IR	A				
002	000-44-2005	IR	A		VOID		
003	000-11-3005	IR	A		VOID 1/8 1/2 6/3/05		
004	000-44-3006	IR	A		VOID 1/8 6/3/05		
005	000-11-2006	IR	B		VOID		

- The information is lined through, “Void” or “Not Tested” is written in, and then it is initialed and dated.
- In addition, the barcode is no longer valid; therefore the first 1/2 inch must be blackened out.

proper laboratory procedures, and they are correctly annotated.

(1) SIGNATURE

(2) DATE SIGNED